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Oct 28 2002 14:40 No. 3861 P. 2

Oct. 28. 2008 2:51PM

497 Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT
CALIFORNIA FORM 497
For Official Use Only

NAME OF FILER: SANTA CLARA COUNTY COMMITTEE AGAINST PROPOSITION 8

AREA CODE/PHONE NUMBER: 408-265-8400

ID NUMBER (if applicable): 1309109

STREET ADDRESS:

CITY: SAN JOSE

STATE: CA

ZIP CODE: 95125

Date of This Filing: 10/28/08

Report No.: PR-1

☐ Amendment to Report No. _____ (explain below)

No. of Pages: 1

Date Stamp: RECEIVED AND FILED in the office of the Secretary of State of the State of California
OCT 28 2008
DEBRA BOWEN Secretary of State

YR

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/28/08	EQUALITY FOR ALL WEST HOLLYWOOD, CA 90069 FPPC# 1259396	PROPOSITION 8: Eliminates Right of Same-Sex Couples to Marry STATE	17,000	NOV 4, 2008

Reason for Amendment _____